UNITED STATES DISTRICT COURT

NORTHERN DISTRICT OF ILLINOIS

SUMMONS IN A CIVIL CASE

MARIA SHTRAYM A71 317 370

CASE NUMBER:

08C2590

V.

ASSIGNED JUDGE:

JUDGE GUZMAN

MICHAEL CHERTOFF, Secretary of the U.S. Department of Homeland Security, et. al.,

DESIGNATED

MAGISTRATE JUDGE: MAGISTRATE JUDGE COX

TO: (Name and address of Defendant)

U.S. Attorney's Office Northern District of Illinois 219 S. Dearborn Street, Suite 500 Chicago, Illinois 60604

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Stanley J. Horn Horn, Khalaf, Abuzir, Mitchell & Schmidt, LLC 2 North LaSalle Street Suite 630 Chicago, Illinois 60602

an answer to the complaint which is herewith served upon you, within	days after service of this
summons upon you, exclusive of the day of service. If you fail to do so, judgmer	t by default will be taken against you for the
relief demanded in the complaint. You must also file your answer with the Clerk o	f this Court within a reasonable period of time
after service.	•

Michael W. Dobbins, Clerk

(By) DEPUTY CLERK

May 6, 2008

Date



Case 1:08-cv-02590 Document 12 Filed 07/08/2008

Page 2 of 2

AO 440 (Rev. 05/00) Summons in a Civil Action

nd complaint was made by me ⁽¹⁾ Lley Ciepiela Cappropriate method of service Con the defendant. Place where ser	DATE July 8, 2008 TITLE Senior Paralegal Typed:
appropriate method of service	Senior Paralegal
appropriate method of service	
oon the defendant. Place where ser	rved:
ing therein.	r usual place of abode with a person of suitable age and
i:	
rved defendant by certi	fied mail with return receipt.
:	
STATEMENT OF SERVICE FEES	
SERVICES	TOTAL
DECLARATI	ON OF SERVER
Date Signature of Service Signature of Service Horn, Kha	Vaf, Abuzir, Mitchell & Schmidt lle Street
	statement of Service and Statement of Service Signature of Service Signature of Service And Suite 630 Chicago,

UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

STANLEY J. HORN HORN, KHALAF, ABUZIR, MITCHELL & SCHMIDT 2 N. LASALLE STREET SUITE 630 CHICAGO, ILLINOS 60602

RE: SHTRAYM -V- CHERTOEF

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature D. Agent D. Addressee B. Received by (Printed Marne) C. Date/of Delivery 5/12/08
1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
U.S. ATTORNEY'S OFFICE NORTHERN DISTRICT OF ILLINOIS 219 S. DEARBORN STREET SUITE 500	
CHICAGO, ILLINOIS 60604	3. Service Type Certified Mail Registered Receipt for Merchandise Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7001 0360	0000 4307 777b
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540